



DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

English Language Division

As a SOLE named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below, next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

IMPROVED AUTOMATIC SURGICAL DEVICE AND CONTROL ASSEMBLY FOR CUTTING A CORNEA

the specification of which

(check one)

_____ is attached hereto

X

JANUARY 31, 2002

_____ was filed on _____ as

10/062,178

Application Serial No. _____

and was amended on _____
(if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate have a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s):

Priority
Claimed

_____ (Number)	_____ (Country)	_____ (Day/Month/Year Filed)	Yes	No
_____ (Number)	_____ (Country)	_____ (Day/Month/Year Filed)	Yes	No
_____ (Number)	_____ (Country)	_____ (Day/Month/Year Filed)	Yes	No

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national PCT International filing date of this application:

09/841,165
08/840,430
08/598,180

April 24, 2001
April 29, 1997
February 7, 1996

Pending
Patented
Patented

(Application Serial No.)

(Filing Date)

(Status)
(patented, pending, abandoned)

09/065,848
08/845,171
09/690,204
09/433,478
09/433,479

April 24, 1998
April 25, 1997
October 17, 2000
November 4, 1999
November 4, 1999

Patented
Patented
Pending
Patented
Pending

(Application Serial No.)

(Filing Date)

(Status)
(patented, pending, abandoned)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made of information and belief are believed to be true; and further, that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (list name and registration number)

James E. Wetterling - Reg. No. 31,440
Peter A. Matos - Reg. No. 37,884
John Fulton, Jr. - Reg. No. 46,716

Jennie S. Malloy - Reg. No. 37,670
John Cyril Malloy - Reg. No. 19,531

Send correspondence to: **MALLOY & MALLOY, P.A.**
2800 S.W. Third Avenue
Historic Coral Way
Miami, Florida 33129

Direct telephone calls to: (305) 858-8000

Full name of sole or first inventor

JOHANN F. HELLENKAMP

Inventor's signature

Date

Residence

Miami, Florida

April 29, 2002

Citizenship

USA

Post Office Address

10060 S.W. 89th Court

Miami, Florida 33176

Full name of second joint inventor, if any

Inventor's signature

Date

Residence

Citizenship

Post Office Address

(Supply similar information and signature for third and subsequent joint inventors.)